

THE CHIRONIAN

PUBLISHED SEMI-MONTHLY BY THE STUDENTS OF THE HOMOEOPATHIC MEDICAL COLLEGE.

VOLUME IV.

NEW YORK, FEBRUARY 15, 1888.

NUMBER 8.

THE CHIRONIAN.

VOL. IV.

FEBRUARY 15, 1888.

No. 8.

EDITORS:

R. E. HINMAN, *Managing Editor.*

W. A. WAKELEY, *Business Manager.*

ASSOCIATE EDITORS:

E. S. SMITH, *Mat. Med.*

F. W. HAMLIN, *Obstetrics.*

C. N. PLATT, *Surgery.*

D. H. MCGRAW, *Paedology.*

C. A. GWYNN, *Practice.*

A. A. HOAG, *College Notes.*

W. H. BENNETT, *College Notes, '89.*

F. LE C. DOWE, *Assistant Business Manager.*

TERMS:

Per annum, in advance, \$1.50. Single copies, 15 cents.

All communications should be addressed to THE CHIRONIAN, N. Y. Hom. Med. College, 23d Street and 3d Avenue, N. Y. City.

Alumni, Professors and Undergraduates are asked to contribute to our columns. All articles must be signed by the name of the writer. The editors are not responsible for opinions of contributors.

Subscriptions taken at the College. Single copies may be obtained in the "Students' Room."

All remittances by mail should be made to the Business Manager, at the College.

THE CHIRONIAN will be sent until ordered discontinued.

WE would call the attention of the students of the college—especially those of the Middle Class—to the excellent advantages offered them in the College Dispensary. This institution is supported for the purpose of affording clinical material for their education, and should not be neglected. Though the winter course of lectures are growing less didactic year by year, still the supplemental knowledge which can be attained by attendance on the various clinics held in the Dispensary during the summer is simply invaluable—as we know from experience. Several men—over a dozen, we believe—attended more or less regularly last summer for three months and over, all of whom say they think they learned as much there during that time as a six-months course in the lecture room would have taught them.

You will be treated with courtesy and kindness by the physicians there, that we can vouch for; and all that is instructive will be pointed

out and explained to you. You will be asked to prescribe, too, under the supervision of the attending physician, and although your prescription will be subject to his criticism, also that of other students with you, do so, as your mistakes will always be remembered, and knowledge thus gained is indelibly fixed in your memory.

We cannot say too much in praise of Drs. Palmer and Garrison of the Children's Department. They never tire in their kindness to the sensibly inquisitive student, and are always ready to tell you *why* they prescribe thus and so, and the student who takes advantage of such opportunities will have just cause to congratulate himself.

In the Surgical Department, Dr. H. S. Graves will let you bandage sore legs until your back is broken. But do not think that because you are simply putting on a bandage you are not learning. You will have to take it off and put it on better more than once. Here you will meet with all those cases which it will be your duty to treat in office practice; and, to meet these cases with confidence, it is necessary you should be familiar with them as they come. Learn while you are a student all that you can.

The Genito-Urinary Department, under Dr. Beyea, is always open to one or two students. You have only to know the doctor to admire his dexterity, much of which you can make your own by attention and study in this department. Dr. B.'s kindness to the students is too well known to make it necessary to mention it here.

Drs. Swift and Dowling, in the department of Diseases of the Heart and Lungs, have excellent material from which to demonstrate, and you can learn much of physical diagnosis by attendance here. They are always willing to explain.

Drs. McDonald and Macy, in the department of Gynecology, though they only admit one student to each, will tell you much that should be yours. Their clinics are invaluable.

There are other Special Clinics: Diseases of the Skin, Prof. Arcularius and Dr. Sinsabaugh; and General Clinics.

The student who takes advantage of these opportunities is better equipped in every respect than those with but theoretical knowledge. Do not neglect them; attend regularly during the summer months, and gain all you can from them.

Diseases of the Ear. Are they Amenable to Homœopathic Treatment?

HENRY C. HOUGHTON, M.D.

DO our remedies act on bone and periosteum? Ask Professor Helmuth, having in the mind's eye that "wicked shake of a forefinger about three inches from our nose." Do they act on mucous membrane? Woe to you, on the home stretch, if you say nay to the professors of practice of medicine. Do they act on the skin? If you say no, there is one skin, much coveted, concerning which you will be palmless. Do they act on the nervous system? Take ignatia with plentiful sleep and wait the final examination in calm assurance.

It will be twenty years, next June, since we were admitted as gleaners in the field of clinical experience afforded by a large eye and ear hospital. Previous to that date, unassociated labors had given the profession a limited repertory to guide us in the new departure; since then we have treated upwards of two hundred thousand patients affected with diseases of the eye, ear and throat. My first experience in practice was as physician to the Five Points' House of Industry in this city. One year, and one thousand cases of the diseases incident to childhood and youth, settled forever the question of therapeutics; not less firmly has a score of years settled the question which we have now raised.

The ear consists of three divisions; each offering special observation of medicinal action. External ear,—skin, muscle, fascia, cartilage. Middle ear—mucous membrane, muscle,

bones, articulations. Internal ear—serous membrane, nerve filaments. Each and all enclosed in bony walls lined by periosteum. Considered as a whole, or in its parts, the ear is an interesting subject of study, and in no one direction more markedly so than in therapeutics.

Take an instance from external disease. Perifollicular inflammation of the outer third of the external auditory canal—furuncle; the older repertories give *hepar. sulph. calcarea* as the remedy, and correctly; provings lead to *picric acid*. Clinical tests show that a combination of the two in *calcarea picrata* give as near a specific as can be found in medicine. The action of *arsenic*, *graphites*, *psorinum*, *sulphur* is as certain as the indications for each are clearly given by pathological and clinical records. The personal sufferings of an heroic prover of *tellurium* give objective and subjective symptoms which guide to the relief of many a little one; so that it is not impious to say that, in a physical sense, a prover like Dunham is a vicareous sufferer.

The middle ear widens our range of observation, just in proportion as the number of remedies found useful in its affections multiply. Certainly no portion of the human body can furnish more marked instances of the actions of our remedies. Actual inflammation yields, in a wonderful way, changing under one's eye from day to day, or even from hour to hour, but neuralgic symptoms disappear in a magical manner. *Chamomilla*, *dulcamara*, *plantago maj.* have relieved pain of a neuralgic type at once when other remedies had only mitigated it. Remedies which would not be thought of, from local symptoms alone, will do the same. Instance: A male patient came to the Ophthalmic Hospital clinic who had been under treatment four months, at various public clinics. The last prescription was made at a college clinic, by a skilled practitioner in nervous diseases. After an interesting lecture on neuralgia, he ordered hot ironing of the spine and some internal medicine to cause sleep. No relief was obtained. A prescription of *plantago maj.* only mitigated the pain. On seeing the patient we found no evidence of inflammation. The history was peculiar: The trouble was set up by

being wet; the pain was general at first; a lameness then settled in the back. When most severe it extended to the shoulders, occiput, running up over the head, to the brows and extending to the ears; the otalgia being the most severe phase of the case. *Silicia* gave complete relief in less than one half hour from the administration of the first dose, and there was no relapse. In otalgia neuralgica from carious teeth, the local and internal use of *plantago maj.* is equally effective, so that patients will postpone the dental treatment upon which we insist.

In acute otitis media, either of catarrhal nature or that which passes on very rapidly to suppuration, one cannot be sceptical, if he watch these cases with unbiased mind. *Aconite*, *belladonna*, *chamomilla*, *ferrum phos.*, *gelsemium*, *pulsatilla*, will arrest the initial hyperæmia and guard against the imminent suppuration; even when the patient has tried domestic measures, and made matters worse by delay, we can carry these to an early resolution, with almost perfect restoration of the drum-head.

In chronic otitis media catarrhalis, of recent history, we can overcome the tendency to closure of the Eustachian tubes, restore the mobility of the ossicula, and thus raise the hearing to the normal standard. Of course, the ordinary helps in mechanical treatment are used; but these alone do not accomplish these ends, having failed when used apart from medicines. *Baryta mur.* *iodine*, *kali muriaticum*, *kali sulphuricum*, *Mercurius* and its compounds, specially *mercurius dulcis* and *proto iodide*, act upon the mucous membrane of the tympanum and Eustachian tube; they increase its secretions, thus overcoming the rigidity which perils the excursions of the ossicula, and the conditions of the tube which interfere with the normal intra-tympanic air pressure.

In chronic otitis media suppurativa we have the results of a constitutional dyscrasia in its worst form, and it is impossible to cure, by local means alone; these must be joined to the use of such alterative agents as have been proved effective. I have been surprised at the great change, the rapid local repair, the general, systemic, transformation of childhood life, that

has followed the use of a remedy selected as the similar. The lime and potash salts, as well as the metallic compounds, are more valuable in the minimum dose; the exception proves the rule. *Calcareo carbonica*, *calcareo phosphorica*, *calcareo sulphurica claps*, *hepar sulph. calc. kali*, *sulphurica*, *mercurius*, *silicea*, *sulphur*, *teucrium*, not to mention a score of remedies less salient, act to arrest destructive ulceration, change morbid processes to healthy ones, hasten repair, and prevent relapse. In that complication of suppuration known as *mastoid disease*, we were led, by purely pathogenetic symptoms, to use *capsicum*, and clinical experience has confirmed the writer's experience. Cerebral congestion, complicating middle ear disease, is controlled by *belladonna*, *cicuta virosa*, *cocculus*, *ferrum phos.*, *gelsemium*, *glonoine*, *opium*, *veratrum viride*, just as in primary congestion of the brain.

Perfect function of the internal ear presupposes an exact adjustment of the serous fluid of the labyrinth and the capillary circulation of the essential parts of the perceptive apparatus in Cortis, organ and the ampullæ. We cannot inspect morbid processes here but pathology teaches that anemia, congestion and exudation play the same disturbing part that they do elsewhere in similar tissues, and we may infer that the changes caused by toxic agents are overcome by similar ones which antidote their action. *Salicylate of potash* and of *soda* produce recognized changes. *Hydrobromate of soda* causes functional disturbances. *Quinine* causes organic changes in the internal ear. *Cinchona* overcomes tinnitus of anemia. Poisoning by *chenopodium anthelminticum* leads to its use, and it corrects the sensitiveness of the auditory nerve to the sixteen and thirty-two feet organ pipes; tones recognized by the long fibres of Cortis organ.

Reasoning from known pathology to known clinical results, we believe that the subjective ear symptoms, observed under the general term tinnitus aurium, are due to changes in the tympanum which alter the intralabyrinthine pressure or to changes in the circulation of the labyrinth, which act in a similar manner, caus-

ing nervous irritation. We must expect those central changes in the trunk of the acoustic nerve, which correspond to an optic neuritis. Any remedy which will act to overcome the tympanic changes, or to correct functional disturbances of the circulation in the labyrinth, will overcome tinnitus aurium. We are apt to say "every remedy has tinnitus aurium," then every remedy may prove of value in curing it; there are shades and degrees, peculiarities, which may lead us to the remedy, when the pathology does not suffice. This neglected field will yet yield good harvests.

Diseases of the ear *are amenable* to our remedies; even our friends of the "regular school," falsely so called, being judges. Their quiet adoption of our remedies is a credit to our methods, if not to their honor. We shall gain nothing, and lose much, by abandoning the new road of careful study of specific remedies, to travel on the old highway of empiricism, strewn on both sides with abandoned wrecks that had their day of lauded merits, only to be forgotten in the cries that heralded the next new craze, another panacea.

Operation at Helmuth Hospital.

REMOVAL CYSTIC TUMOR OF PAROTID GLAND.

ON the 25th of January, a few members of the Senior Class had the opportunity of witnessing a very interesting operation at the Helmuth Hospital, which was preformed by Dr. Helmuth and assisted by Drs. Wilcox and Knight. The following account of the history of the patient and the operation is reported by Dr. Knight, the house surgeon:

Mrs. B——, age 40.

Tumor had existed for fifteen years. No cause could be assigned for its origin. About five years ago Dr. Butler attempted to reduce the tumor by electrolysis. He succeeded in dissipating two thirds of it, but the other third could not be gotten rid of by any method at his command; since then, and, in fact, during the whole growth of the tumor, the patient has

resorted to medicines and applications, but with no result. Lately the tumor has grown rapidly and taken on a cystic appearance.

At the present time the tumor extends from the junctions of the tragus and helix of the ear down to a level with the cricoid cartilage, forward under the inferior maxillary bone, posteriorly to the posterior border of the sterno mastoid, and raised about two inches. At first the growth was smooth and regular, but since the electrical treatment it had become nodular and small cysts were very prominent upon its surface. The tumor was movable except at its upper portion and was evidently attached to the parotid gland posterior to the ramus of the inferior maxilla.

The patient had lately various distressing disturbances of the cerebral circulation, due to pressure of the tumor on the vessels of the neck, and could not sleep when lying on the right side (the tumor was on the left), because the weight of the growth obstructed the return of blood from the head. She was accustomed to lie on a pillow having a depression into which the tumor fitted.

Tumors of the parotid are not very frequent, and may be benign or malignant. The malignant are usually of the encephaloid variety and spring from the gland structure itself, not from the structures superficial to it. They grow rapidly, are solidly fixed and are of an ill-defined outline. The skin soon presents characteristic symptoms of infiltration, and often there is a soft, pulpy feeling beneath. Benign tumors, on the other hand, are of very slow growth, are movable, their outline is well defined and the skin is not involved. Their nature is complex, consisting of cartilage, fibrous and mucous tissue mixed together; while often there is tissue imperfectly representing a racemose gland.

Removal of these tumors is generally a matter of great difficulty. If the growth be malignant, it would better not be attempted; for it is impossible to reach its deeper attachments, and the return of the growth is certain. In benign tumors, on account of the proximity of important vessels and nerves, the most careful dissection is necessary. The temporomaxillary artery is often divided, but can be tied easily. A worse

misfortune is the division of the facial nerve, causing paralysis of the muscles of expression, or any large branch of the pes anserinus. Sometimes it is impossible to avoid them, as they are imbedded in the morbid mass.

Removal.—A long incision from the lobe of the ear to near the cricoid cartilage was made in order to give an opportunity to ligate the carotid if necessary. The artery was exposed and located and the dissection of the tumor proceeded with. The skin flaps were taken off from below upward, and as more and more of the mass was uncovered it was with some difficulty raised from its bed. The external jugular was cut and tied. As the dissection went on it was found that the bifurcation of the carotid was somewhat higher up than usual, and from it the growth was separated only by a thin fascia. A large branch of the facial was divided and tied, also the transverse facial, but the temporal artery ran beneath the tumor. The facial nerve was not disturbed nor the digastic or stylo-hyoid muscles. When the dissection was completed it was found that the tumor could be completely separated from the gland to which it was attached by only a thin pedicle. A silk ligature was thrown around this pedicle and the tumor then removed. All bleeding was now stopped, a drainage tube laid in the wound, the skin brought together and sewn first with four hare-lip pins, and after by catgut sutures; compresses and an antiseptic dressing completed the operation.

I found on opening the tumor that there were various areas of fibrous tissue and also cartilaginous material with many small cysts containing a gelatinous substance, together with considerable glandular tissue.

A Case in Practice.

ON the 27th of December I was called to attend a lady in confinement; patient thirty-four years of age, mother of six children and in excellent condition. Shortly subsequent to my arrival the membranes ruptured, a head presenting, but very high and not engaged; I found that with every pain the head was forced

on the pubes. Attempts were made by external manipulation to correct this; but after a long trial, with no result, a hand was introduced and the head brought into position, and endeavors made to retain it by external pressure; the advantage, however, was soon lost, and I then made use of a single blade, with which the presenting part was again brought into position; this failing, I concluded to deliver with forceps. Previous labors were slow, and the patient having remarkable strength, I think justified me in not resorting to instrumental aid sooner. After considerable difficulty, due to the high position, the child was delivered. On the left side of the frontal bone was a depression into which an ordinary hen's egg would have almost disappeared, and no one present could in any way explain it otherwise than that it was caused by pressure against the pubes for so long a time prior to our arrival. The child uttered a few faint encephalic cries, and was quite distinctly suffering from brain pressure. The father's consent being obtained, Dr. W. H. Pierson performed the following operation: Valvular incision, large enough to admit a stout director, over the anterior fontanelle, the director was then passed between the membranes and the bone, and attempt made to spring it in place; the director not being of sufficient strength, the incision was enlarged, and a pair of blunt-pointed curved scissors introduced (this being the only available instrument of sufficient strength) and the bone then sprung into place. The relief to the child was immediate. Wound dressed with compress, and patient left resting comfortably; late that evening the child died in coma. Consent to *post-mortem* was refused, but the opinion entertained is that the child's death was due to laceration of brain tissue, consequent upon the extreme compression, and that the operation in itself was a success, the child having lived eleven hours, and we are sure he would have succumbed earlier had this pressure not been removed. '87.

CHARLES READE named a favorite dog *Tonic*, because he was a mixture of bark, steal and whine.—*N. Y. Medical Times*.

Human Color in Different Races.

THE following interesting item appeared in the "American Analyst," "In treating a negro in Leipsic for an ulcerous affection, it was found necessary to replace portions of the skin with pieces taken from one or two white persons. These latter pieces gradually grew darker in color, and finally as black as the patient's own skin. This singular fact led to an experiment being made of transposing a portion of black skin on a white patient, and it was found after a few weeks these began to grow pale. In less than fourteen weeks they had, in fact, grown so white as not to be distinguishable from the patient's natural skin."—*Southern Clinic.*

The Management of Weak and Immature Infants.

OFTEN we cannot succeed in stopping the premature expulsion of the fœtus, and children are then born in a state of feebleness which requires particular care. This congenital weakness is readily recognized by certain characters; one of the most important is the inferiority of weight in such children as compared with those born at full term. At the end of the ninth month of intra-uterine life, the product of conception weighs from three thousand to three thousand five hundred grammes (about seven pounds), but if it is born before this period it will weigh less proportionately. A development of between eleven hundred and two thousand five hundred grammes may be called congenital feebleness. But one must base the appreciation of vitality of newly born children not alone upon their weight, for some of them present a fair weight, but their organs are imperfectly developed. They breathe and eat poorly. Other children remaining longer in the uterine cavity may have only the same weight and yet be fully developed, and they can breathe and digest better. The knowledge of the age of infants born before term is therefore of great value, and we should always endeavor to fix it with the greatest care. "The

infant affected by congenital weakness," says Guéniot, "has certain external characters which will scarcely deceive an experienced eye, and which enable the diagnosis to be made even before having the child weighed. In such infants the organs are ill-formed and the functions incomplete; the entire body is thin; the skin is soft and delicate and of a uniform bright red color, and its transparency sometimes permits us to see the blood-vessels that course underneath. The infant's cry is not vigorous: ordinarily it is sharp and monotonous, like the cry of the chick. The respiration is feeble and almost imperceptible. The thorax seems, so to speak, immobile, and does not present those alterations of rise and fall which are so manifest in the robust infant." The inertia of the external muscles is striking. "They hardly seem to contract, and the movements of the limbs are very rare and without vigor. The child, plunged in a sort of torpor, has not even strength enough to suck; the muscles of the mouth-walls and of the tongue and palate are apparently insufficient to cause suction, and deglutition itself is often slow—a grave symptom, since the regular accomplishment of this physiological act alone renders life possible." A well-conducted hygienical treatment is the only means of combating this state, and it should consist in the use of heat and in a well-directed alimentation.

The action of the exterior air and variations of temperature are eminently dangerous for these little infants born before term, and they must therefore be kept in an atmosphere as warm and as equable as possible. Guéniot says "that the hand, when placed in contact with its hands, feet or legs, and even its nose, should feel a sensation of heat equal to that of a warm bath." The newly-born child that suffers from congenital weakness must, in one word, be *penetrated with heat*, and it is only upon this condition that circulation, respiration, and all the great functions of life can go on in its frail organism.

The means which have long been employed to effect this purpose are the following: The members and body are enveloped in a coat of wadding under their clothing, and a fold of cot-

ton is placed around the head. In the cradle, two or three bottles of hot water are placed beneath the blankets, which are renewed from time to time. In changing the child, it is held before a good wood-fire. In certain cases they have been kept in a room heated to 25 deg. C. (77 deg. F.), but it can easily be understood how difficult this is in practice. Massage is also resorted to in order to increase their circulation, and their limbs are rubbed with warm oils during five minutes, which is to be repeated two or three times in the twenty-four hours. Warm baths, in which some three quarts of wine is put, are used, and frictions with brandy, aromatic wine, lavender, etc., also have been resorted to.

In regard to the alimentation of infants born before term, the general rule is that the child is to be fed with its mother's milk or that of a wet-nurse direct from the breast. It should be well known to every one that a child may make suction movements and yet not swallow in reality. To be sure that it has really been fed, it should be weighed both before and after nursing. If it does not swallow sufficiently, the milk is dropped into its mouth directly from the breast or given with a spoon; its meals should be given at least every two hours, and if possible every hour, *at least during the day*.

Such are the methods that have been in use for years until Tarnier's hatching-cradles were introduced, in which to maintain these infants in a constant temperature and in warm air. It was in 1857 that Professor Denucé, of Bordeaux, wrote as follows: "Having had occasion to give my care to an infant born about the sixth month of foetal life, I found myself in presence of two indications,—to feed the child, and to keep up its temperature. To fulfill the second one I had constructed a cradle made of zinc, with double sides and bottom. Imagine, for instance, two bath-tubs, one smaller than the other, one put within the other, leaving a space in which it was possible to put hot water; a funnel was placed at the top part, and a spigot at the bottom to draw off the water. To prevent loss of heat, the whole was wrapped round with flannel. Hot water was then put into the space between the cradles, and a thermometer

gave the temperature, and allowed us to keep up a regular degree of heat." In the case spoken of it was sufficient to draw off a pint of water, and add as much hot water every six hours. Credé, in 1884, also published an account of a similar apparatus that he had used.

Finding these sorts of incubating-cradles insufficient, Professor Tarnier had constructed one resembling a very large hatching-machine, which was erected at the Maternité Hospital, Paris, in 1880. The temperature was maintained at 32° C., according to Tarnier's advice, and Dr. Budin had a Regnard's regulator adapted to it, with electric alarm-bell. We will not describe this machine, as it was large and costly, but M. Tarnier has recently had made a small apparatus suitable for family use, which is very simple and easily managed; it can be made by any carpenter at very little expense. "It is a box made of wood, sixty-five centimetres long, by fifty high, and thirty wide, and the sides are twenty-five millimetres thick. The inside of the box is divided by a partial partition into two parts; this horizontal partition is placed about fifteen centimetres from the bottom of the box. The lower story is intended for some hot-water bottles, such as are called 'monks' in Paris." (They are simply earthen hot-water bottles, with a flat side, and the hole for the cork on one side.)

There are two doors: one is a sliding door on the side of the box, to push to either side for the purpose of introducing the hot-water bottles; the other is at one of the ends; it does not completely close the orifice, but allows air to enter. The upper part, for the baby, contains its bedding and is covered with a glass top; it should close as tightly as possible with two screws. In the top above the feet of the infant is an outlet for air, to which a small ventilator can be attached. In the opening between the two chambers a wet sponge is placed to keep the air slightly humid, and a thermometer is also placed here to mark the temperature. The heating arrangement is the earthenware jugs, in the bottom compartments; they are twenty centimetres long and contain a pint of water; four or five of them are used to keep the

temperature at 31° or 32° C. It is heated to this degree before putting the child in, and every one and a half to two hours one of the hot-water bottles is changed for a fresh one. The air passes in by the little trap in the side near the bottom, is heated by the bottles, and, passing by the sponge, escapes at the top above the feet of the child. The movements of the small ventilator at this opening will show that air passes.

The child should be put in swaddling-clothes, as it has been observed that the temperature is always two or three degrees higher under the clothes than it is in the hatching-machine. It should be from 32° to 33° C. in the apparatus. Every hour or two, according to the case, the infant should be taken out to be fed and changed; but it should be kept out the shortest time possible.

The excellent action obtained by such cradles is shown by the results obtained at the *Maternité* in Paris. It should be added, that infants who are attacked with sclerema, œdema, cyanosis, etc., also derive great benefit from being placed in the hot cradle, and often twenty-four hours will be enough to bring about a decided improvement. Œdema of newly-born infants disappear with surprising rapidity when they are placed in the machine for a short time. From 1877 to 1880, before it was used, one hundred and eighty-one infants died at the *Maternité* with sclerema; from 1882 to 1885, with the use of the hatching-machine, only nine died.

Since the incubating-cradle has been used, Winckel has advised the use of prolonged warm baths; but we fear it would be difficult to adopt this in practice.

The following table gives the statistics of the *Maternité* of the number of infants put into the *couveruse*:

Weight of Child.	No. of Infants.	No. who Lived.	No. who Died.
1000 to 1500 grammes.	40	12	28, or 70 per cent.
1501 to 2000 "	131	96	35, or 26.7 "
2001 to 2500 "	112	101	11, or 9.8 "

At the *Maternité*, before the introduction of the machine, the infants died at the rate of 66

per cent.; since employing the heated cradle the average proportion is 36.6 per cent.

Credé also obtained good results with his incubating cradle; but his rate of mortality was much higher than Tarnier's. In the lowest weights he lost 83.3 per cent.; in the next, fifteen to two thousand grammes 36.5 per cent., and taking the total, he lost 44.6 per cent., and some of his patients were over the weights given by Tarnier, who does not put the heavier children in the hatching-cradle.

Alimentation.—This is a question of the greatest importance in children who are born before term, and Professor Tarnier has adopted a method that we will describe in full. From the very first day an attempt must be made to put children to the breast, and if they are too feeble to suck, the milk may be squeezed into the mouth, or at first on a warm spoon and then given to the child. The mother's or nurse's milk, given pure without dilution or addition, is the best of all things for these infants; but if it cannot be had, then it may be replaced by asses' milk, not boiled, but mixed with warm sugared water in equal parts (three grammes of sugar to 100 grammes of water). If asses' milk cannot be had, then cows' milk used for want of a better, and the mixture to be made is then one quart of cows' milk to three quarts of the sweetened water as above. The cows' milk is better boiled; and that boiled in a water-bath closed up is better than boiled in the open air. It is best of all prepared as follows: The mixture of milk and sugared water is put into what is called the "American pot" (which is an air-tight pot used to make beef-tea in); it is then put into boiling water for half an hour, and when taken out the contents should be turned out to prevent the liquid having a metallic taste. It is given to the child with a small spoon, and when the infant is very small, six to eight grammes of liquid are enough for a meal; but this may be carried up to ten or fifteen grammes when the infant is larger. There should be at least twelve meals in the twenty-four hours.

Gavage.—It will often happen that the child will drink badly and throw up half of the liquid

given, and the alimentation then being insufficient, it gets rapidly worse, diminishes in weight, and frequently has diarrhœa, and it is in these cases that Dr. Tarnier practices what he calls "gavage." The apparatus used is quite simple, being nothing more than a urethral sound of red rubber (No. 14 or 16 French, according to Charrière). At the open end of the sound is attached a glass nipple, sold in the shops under the name of Dr. Boilly's glass nipple. (A small glass funnel would do.) With this it is easy to use the forced feeding system called "gavage." The infant is placed on the knee, with its head slightly raised; the sound is madewet and introduced as far as the base of the tongue, and the infant by its instinctive attempts at deglutition will make it go on as far as the œsophagus. The sound must be then gently pushed down the œsophagus, and it will readily pass into the stomach. The milk or liquid is then poured into the glass funnel, and by its weight will soon find its way down, and will empty into the stomach. After a few seconds the sound must be taken out, and here is the great point of the system: it must be taken out with a rapid motion at once, for if it is withdrawn slowly the milk given will be thrown up after it. The number of meals thus to be given will vary with the age and strength of the infant. As a general rule, eight grammes of milk, given every hour, will be enough when the infant is small, to be increased as needed. As to the aliment to be used, it is the same as in the usual alimentation. Professor Tarnier gives the preference to mother's milk, which they can press into the glass funnel used. If failing, the other milks may be used as stated before.

When the "gavage" is too copious, a curious phenomenon is produced: the infant augments rapidly in weight and in volume, but it is due to an œdema of the whole body, and, as this will disappear with a more moderate alimentation, it can be explained as a hypernutrition. But if, instead of diminishing the quantity of food, it is maintained or increased, before long indigestion will set in, and the child may perish with gastritis and enteritis. This is the great danger, and success is only obtained by giving the milk

in very small quantity and often repeated. When the "gavage" is well done and the milk is not vomited, the infant will digest it well. The fœces are yellow in color, and the child will increase in weight.

When the new-born child gets to be a little stronger, this mode of feeding can be alternated with nursing, and so on, progressively until the "gavage" is given up entirely; but it should be resorted to on the lest sign of digestive trouble. Even when the child is old enough to nurse, should it be at all weak, it is useful, outside of its regularly taking the breast, to practice "gavage" three or four times a day. This is what M. Tarnier calls *gavage de renfort*, as it will keep up the strength of the child so that it can take the breast and digest well.

Notwithstanding that this method of gavage is still being studied, from the results at the Maternité and those of lying-in wards in the hospitals in Paris, it can be said that it is clearly indicated when the infant is born before term, and even if it does not possess the sensation of hunger, or lacks the necessary strength to eat, it is just the same as with the adult: the food introduced artificially into the stomach of the new-born infant will be digested.

Thanks to the employment of the two methods of "gavage" and the Tarnier hatching-machines for the last few years, infants were raised that had been only six months, or six months and a few days, carried in the uterus. So that at last the actual period of vitality has approached the legal period, which in French law is six months of intra-uterine life. So far very few six-months children have been saved in France.

(Translated from the French by Thomas Linn, M.D., Paris.)—*Philadelphia Medical Times, Homœ. Jour. Obstet.*

Ye Men of '87!!

EACH member of the Class of '87 will confer a favor on himself and every one else, if he will write to Dr. C. A. Ward, Secretary, Binghamton, New York. State his present address, tell something of how and what he is doing at present, and what his

prospects are for the future. These reports will be condensed by Dr. Ward and sent on to THE CHIRONIAN for publication. Surely, each and every one of you can afford a few moments time from the rush and whirl(?) of your practice, to let the other boys and your old friends in the infant classes know how and what you are doing. At least, if you have time for nothing else, send in your present address, if you have to do it by postal card.—By request of Dr. B. A. Stilwell, President.

Meeting of the Homœopathic Medical Society of the County of New York.

AT the monthly meeting of the Homœopathic Medical Society of the county, at the college building, corner of Twenty-third street and Third avenue, last evening, papers were read by Professors Conrad Wesselhoeft and J. Heber Smith, the latter of the Boston University of Medicine. The knowledge that these two gentlemen, who are so widely known as authors of valuable medical works, were to submit papers, brought together an unusually large number of members of the society, and many homœopathic physicians of Brooklyn, Newark, and other cities and towns of the vicinity, were also present. Several of them participated in the discussion which followed the reading of the papers.

Professor Wesselhoeft's subject was "The Positive Evidence of Drug Action." His paper recorded the results of an inquiry into the historical evidence of the curative powers of drugs, which showed that the history of medicine only secondarily relates to the effects of drugs as medicines, while primarily it is a search for the origin over causes of life, and is a history of theories and of the strife which theories have engendered. There was nowhere to be found any direct evidence of any organized attempts to demonstrate the curative powers of drugs. The Professor, moreover, showed upon what basis the belief in drugs is founded. Professor Smith's paper was upon "The Polarity of Drug Action."

Among those who discussed his and Wesselhoeft's views were Professors Helmuth, Dillow, O'Conner, Allen, Dearborn, Danforth and Wood.

After adjournment the members of the society and its guests partook of a supper at Delmonico's, which was tendered by President J. Montfort Schley, M. D.

The New York State Homœopathic Society holds a convention at Albany on the 13th, 14th, and 15th inst.—*New York Herald*.

RIDGEWOOD, PA., February 7, 1888.

EDITOR "CHIRONIAN":

DEAR SIR—A stray copy of THE CHIRONIAN having fallen at my doorstep, and finding therein my address given at "Reading, Pa.," I feel tempted to renew, at least a part of the interest which I once manifested in the correctness of the contents of that journal when I had the honor to represent the obstetrical department on her board of editors. Now, the very lax and unsatisfactory manner in which my department was conducted has probably already rendered me sufficiently notorious; however, I should like my address to be given, if given at all, at Ridgewood, Berks County, Pa., where I should be pleased to welcome (for a short time) any future editor of THE CHIRONIAN at the "Ridgewood Sanitarium," although we are not especially fitted up for the entertainment of defunct editors, whose spare moments at third-rate boarding houses have been spent in scratching editorial notes on the fly leaves of Allen's "New Materia Medica," or on the greasy side of a well-worn lap-board "between the acts." As THE CHIRONIAN has not a wide circulation among the boarding-house element in your city, I do not object to your giving my address; however, I always view with some apprehension any increase in New York mail matter arriving here—this you will probably thoroughly understand.

Now another matter of considerable moment claims a few moments of our time. Your twenty-four line editorial shot at the endorsing of diplomas from other colleges is all right. I would not have said this a few months ago—at

least, not while I was in *durance vile* myself—but now that I have arrived at a safe distance from harm, I view matters differently. For instance, when I strode majestically up to the county clerk's desk at our county seat to enter my diploma, I received an electric shock, the effects of which have not yet fully worn away. It happened this way: When I unfurled the precious document which I secured in New York, by what we used to call the *cutis denticuli* (but you hav 'n 't got that far yet, when you do, remember "*Dulce et decorum est pro patria mori*,") the clerk, after looking it over, made the remark: "Oh, it is a New York diploma!" "Yes, sir," I quickly answered, "she is a daisy!" Now, I leave you to imagine what my feelings were when he coolly remarked, "We do not recognize this document *unless it is endorsed by a college in this State*." My pride felt like a cherry seed in a man's stomach. I assure you, now that it is all over, and I have cooled, that had I been in the executive chamber at Albany, and the entire stone ceiling, pig-iron and all, had fallen on me, or had I been, still worse, in Professor Doughty's presence taking his anatomy examination, I could not have been more completely surprised and *non-plussed*. The clerk was a brand-new Democrat who had just been elected after having been out of office for a short lifetime, otherwise I believe my feelings would have gotten the better of me, and I might have crippled him. After getting back to earth, I retreated in fairly good order to a lawyer's office, where I wrote one of my politest notes to the still more polite and courteous gentleman, Professor Thomas, of Philadelphia, dean of the Hahnemann College, asking him to make me eligible to practice in this State by *endorsing my diploma*, which was sent by that day's mail; my request was promptly and cheerfully complied with, and the document returned, and in due course of "red tape" and a dollar was entered, and I was given permission to commence on a few small cases. This bears slightly upon your twenty-four line editorial on the "Endorsement of Diplomas."

Now just one word more and I have done. I received to-day one dollar and twenty-five cents

for a visit to a patient across country, about four miles through the wind and storm (and yet our colleges are filled with medical students), and this dollar and twenty-five cents I'm going to send to an advertiser in THE CHIRONIAN for goods (not green), and I intend to dwell with particular emphasis, in my letter to him, upon the fact that I saw his "ad." in THE CHIRONIAN. All this and more out of pure patriotism.

Yours with much fraternal love,

A. C. STEWART, M.D.,

Ridgewood Sanitarium.

[Probably Dr. Stewart, in his hurry to make that \$1.25 visit across the country, neglected to read the whole twenty-five lines of our editorial. As to his address, we are in doubt whether it is Ridgewood or Sanitarium, but will write to him at Ridgewood.—Ed.]

College Notes.

LOW has been appointed the third member of the library committee from the Junior Class.

DR. JOHN BUCKLYN, of the Class of '87, recently paid his many friends at the college a short visit.

PROFESSOR WRIGHT finished his course of lectures on Hygiene, on Wednesday, February 1st. No one plucked.

THE Class of '90 are making arrangements for a class dinner, to take place some time during the middle of the month.

ALL the spare minutes between the lectures are now taken up by class meetings, and there seems to be no end of important business.

PROFESSOR WRIGHT delivered the last of his course of lectures on Hygiene, February 3d, and held his examination the same day.

THE Junior Class have swelled their ranks since the holidays in the persons of D. C. Adams, W. I. Pierce, C. N. Haskill and H. Bowen.

No more mutilated subjects are seen on the dissecting tables. Prof. Blackman's word of advice evidently had the desired effect.

PAUL ALLEN, '89, is to be chief usher at the college commencement, and Hallett, '89, is to have the same position at the annual Hahne-mannian exercises.

THE thanks of the Junior Class are due Prof. Leal for kindly offering to give his time, Tuesday evenings, to an informal quiz in chemistry.

WHILE crossing Broadway at Eighteenth Street, on Sunday morning, January 22d, Prof. Dowling received quite a severe injury to the shoulder, caused by the breaking of an axle of the carriage he was riding in.

At one of Prof. McDonald's recent lectures it was observed that there was not one of the members of the Middle or Junior classes present. It would seem that there was a fault in the system that calls loudly for reform.

IT is well known that certain members of the Class of '89 are earnest advocates of the cause of temperance, but it was hardly supposed that conscientious scruples would compel them to leave the lecture room while the Professor was giving the most approved treatment of snake bites.

WILL (son of country doctor): "Father, what makes the particles of bread stick together?"

C. D.: "Now, Will, that suits me. It gives me great pleasure to see your observation and desire to learn. Well, it's just like this: You see, the process of baking turns the starch into glucose, and glucose—glu—see, Will?"

WIGGINS, '88, was the first member of the Senior Class who assisted Dr. Beyea at the birth of twins this winter. If Dr. Wiggins will be as successful in his future career, as regards confinement cases, he is sure to make obstetrics a specialty, and also might get an offer from Bismarck in Germany, to settle there, so that more soldiers may be produced to defend the "Fatherland."

THE tincture of Nux Vomica triturations, each containing one minim, have proved very useful

in the treatment of obstinate constipation, rapidly cleaning the furred tongue, and producing a copious action of the bowels. The tablets are also useful in dyspepsia and in the vomiting of pregnancy.—*Murrell.*

This is from the "Medical Record," a leading old-school journal. All we can say or do is to ring the bell and call "Chestnuts."

OH! GIRLS!!

A GIRL is the awfullest myst'ry
That was certainly ever created;
And the reason she's so inconsistent,
Can't at once be readily stated.

She is sly, she is bold, she is cranky,
She is bright, she is *charming*, she's gay;
She will talk you to death in a minute,
And she *always* wants her own way.

She will faint at the sight of a June-bug,
But dare even death for a kitten;
She will make you a promise and break it,
And as often she'll give you the mitten.

She is fair; she is vain; she's *delicious*;
She's as changeable as a March sky;
She is false, she is true, she is silly,
In one minute she'll laugh and cry.

She's a *fraud*, she is terribly awful,
And yet you can't help but love her;
If she was n't *just* what she *is*,
You would n't think half as much of her.

W. A. W.

STUDENTS are respectfully informed that the American Homœopathic Pharmacy, 3 East 19th street, has now in stock the following new publications. Committee courteously received by appointment in relation to club orders for same:

Farrington Clinical, M. M., cloth, \$6.00; half morocco, \$7.00.

Bœricke and Dewey, Ther. Rep. Schüssler's Tissue Remedies, \$2.50.

Ludlam Diseases of Women, half morocco, \$7.00.

Perkins Rheumatism, \$1.50.

Southwick Practical Gynæcology, \$3.75.

Mack's Similia Similibus Curantur, 40 cents.

Andrews' Rectal and Anal Surgery, \$1.25.

In regard to outfits of medicines and surgical goods, special inducements offered; only first-class guaranteed goods sold at my establishment.

Very truly, C. T. HURLBURT.

THE American Institute has awarded the Medal of Superiority to the Jerome Kidder Manufacturing Company, No. 820 Broadway, New York, for their 1887 exhibit of "Electro-Medical Apparatus and Appliances and Instruments." For fifteen years the Jerome Kidder Machines have received the highest awards from the American Institute over all competitors and wherever exhibited in competition.

Their large, elaborately finished Cabinet Battery, unique in design, attracted much attention.

The materials and workmanship of their batteries are not to be excelled, and the experience of physicians is decidedly in their favor. The "Tip Battery," a speciality of the firm, is so constructed that it can be instantly thrown out of or into action, and there is no trouble from the handling of the elements, or the dripping and inconvenience incident to the ordinary Faradic apparatus.

Books Received

The Twelve Tissue Remedies of Schüssler. Wm. Boericke, M.D., and W. A. Dewey, M.D. Philadelphia: F. E. Boericke. New York: Boericke & Tafel, pp. 303. Price \$2.50.

THIS is the only complete book that has thus far been offered on the tissue remedies of Schüssler, and the clearest exposition of his Biochemic theory we have seen.

This theory of the action of remedies has caused much comment in the Homœopathic world, both favorable and unfavorable. Whatever may be the truth of the theory, the application of the remedies has been adopted by most of the homœopaths throughout the country. No doubt, the success in their application would be much greater did these remedies receive the same study as the ordinary remedies of our Materia Medica, but the careless manner in which they are frequently prescribed often leads

to failure. To be successful with them, *study* and familiarity are necessary.

Clinical cases are recited to show the manner of prescribing; in fact, the book is largely clinical, almost too much so. Wisely, the remarks on intermittent fever are short and the clinical cases few. Potent as these remedies are in many conditions, we think this disease is too hydra-headed for even the "twelve."

Professor Wm. Tod Helmuth says: "I find the tissue remedies very valuable as far as I have tried them, especially calc. phos. and calc. fluor., in slowly healing fractures of poorly nourished patients."

Professor St. Clair Smith says: "As far as I have tried these remedies, I have been very successful with them; I prescribe ferrum phos. much oftener than aconite."

Professor Malcolm Leal says: "I have used these remedies with marked success, but am as careful to get indications for them as I am with any remedy; they need study."

Similia Similibus Curantur? C. S. Mack, M. D. Boston and Providence: Otis Clapp & Son, pp. 31. Price 40 cents.

DOCTOR MACK argues Homœopathy pro and con in this pamphlet, and winds up by saying: "I see nothing to accept or offer as positive practical proof that similars cure or that they do not; I am disposed to try to cure with similars, excepting where non-curative treatment promises more of usefulness than does an attempt to cure."

In other words, the doctor is on the fence, and takes thirty-one pages of good paper and clean type to say so.

Rheumatism. D. C. Perkins, M.D. Philadelphia: F. E. Boericke. New York: Boericke & Tafel, pp. 180. Price \$1.50.

THIS interesting volume will doubtless fill a space in the library of most Homœopaths, for it has been needed long enough. Such a subject as rheumatism is of sufficient importance to deserve a place of its own in the Therapeutic library and we are glad to see it done. Get it; you will be saved many hours of laborious research by referring to the excellent repertory in the back;

and get the proper indications for your prescription in a quick and accurate manner. It is as books should be, so that you can hold it in your hand and read. Of the mechanical appearance all that is necessary to say is that it is from the Hahnemann publishing house, which is always a guarantee of excellence.

THE CENTURY FOR FEBRUARY.

A DELIGHTFUL essay by James Russell Lowell, on Walter Savage Landor, is one of the many features of the February *Century*. It is accompanied by a frontispiece portrait of Landor, and a collection of his before unpublished letters to Miss Mary Boyle, revealing his interesting personality, and his opinions on art, politics, etc.

Mr. Kennan's series, which is important enough to be torn by the Russian censor from copies of the *Century* sent to that country, receives a notable addition in the study of "A Russian Political Prison," a terribly pathetic description written from personal investigation and inquiry. This series not only helps one understand the Russian situation, but it is likely to take a deep hold of the reader.

Theodore Roosevelt writes, also in a popular vein, of "Ranch Life in the Far West," with intimate knowledge of his subject, which is largely the cowboy. His article tells just the things one wishes to know of the subject, and is fully and vigorously illustrated by Frederic Remington, who himself has had experience as a cowboy. Mr. Roosevelt says in conclusion: "The present form of stock-raising on the plains is doomed and can hardly outlast the present century."

"Pictorial Art on the Stage" is a subject upon which Mr. and Mrs. Edwin Blashfield throw much curious light, the theme being treated from an artistic point of view, with pictures by Mr. Blashfield and much entertaining information withal.

"Living in Paris," a third illustrated paper of general interest, is by the late J. D. Osborne, and was written out of a full experience.

The Rev. Dr. J. M. Buckley, editor of *The Christian Advocate*, adds to his papers on the Mind-Cure and similar phenomena, a curious

study of "Astrology, Divination and Coincidences." Dr. Buckley may fairly be considered to have done a great public service by his exposition of current frauds and hallucinations in this field.

"The European Craze for Decorations" is a timely article by Ernst von Hesse-Wartegg, whose scientific attainments and travels have won him many decorations.

The poetry of the number, besides lines by Lowell and Landor in the articles above referred to, includes: "A Song of the Mocking-bird," by Maurice Thompson; "At the Literary," in dialect, by James Whitcomb Riley (illustrated by Kemble); poems by Charlotte F. Bates, Richard C. Burton and Orelia Key Bell, and a sonnet to Emma Lazarus, by Richard W. Gilder.

The fiction is by Edward Eggleston ("The Graysons"), by George W. Cable ("Au Large"), the conclusion of "The Dusantes," by F. R. Stockton, and a short story, "The Governor's Prerogative," by Octave Thanet. Miss Eggleston's illustration of "Mr. Britton and Big Bob," shows that in her we have a substantial addition to the list of illustrative artists.

The variety of the number, as above shown, is in no way impaired by two important papers to which a large number of readers will turn first of all, viz.: (1) General Sherman's study of "The Grand Strategy of the War"—in which there are interesting comparisons with foreign military operations, and characterization of the relation of different Union movements throughout the war; and (2) The Lincoln History, in which the narrative deals with the Confederate Commissioners, the Cabinet opinions on the reinforcement of Fort Pickens (given from unpublished MSS.), and Lincoln's tussle with Seward, in which it was decided whether the Secretary of State or the President should rule the country.

The editorial articles are on "The Real Nature of Politics," "Honesty at Elections," and "No Successful Substitute for Justice" (Lowell's words on the international copyright question).

In Open Letters there are letters on Mr. Irving's acting, Miss Terry as *Gretchen*, and on "Lynching."